

**INDUSTRIAL LOAN COMMISSIONER**

COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER

Ralph T. Hudgens, Commissioner**2 Martin Luther King Jr., Dr., Suite 702, West Tower, Atlanta, GA 30334****Phone: 404-656-2078 ♦ E-mail: loan@oci.ga.gov****www.oci.ga.gov****ANNUAL GEORGIA INDUSTRIAL LOAN LICENSE RENEWAL****INDUSTRIAL LOAN
GID-006-IL DEC2012**

CALENDAR YEAR _____

LICENSEE INFORMATION

Licensee Name					Loan License No.	
Street Address						
Address # 2						
City		County		Zip Code		
E-mail Address					Phone	

Note: The name and address of the licensee as it appears above shall be the same as presently appears on the license**NOTICE**Pursuant to *OCGA § 7-3-10 (c) et seq* the renewal application is required to be filed annually

**TO AVOID LICENSE *SUSPENSION* OR *EXPIRATION*,
RENEWAL APPLICATION AND FEES MUST BE RECEIVED BY DECEMBER 20TH**
preceding the year for which the license is to be issued.

The annual renewal fee is **\$500.00** per license.

**If payment is by Check or Money Order please remit to:
Georgia Dept. of Insurance-Industrial Loan**

ADDRESS TO REMIT BY MAIL:**Georgia Dept. of Insurance- Industrial Loan, P.O. Box 935138, Atlanta, GA 31193-5138****ADDRESS TO REMIT BY COURIER:****Wachovia Bank, Georgia Dept. of Insurance- Industrial Loan, Lockbox 935138, 3585 Atlanta Ave, Hapeville, GA 30354****PARENT COMPANY (If Applicable)**

Name					
Street Address					
Address # 2					
City		State		Zip Code	
E-mail Address				Phone	

COMPANY OR CORPORATE OFFICER INFORMATION

CORPORATION or LLC	President	
	Secretary	
	Treasurer	
	Manager	
PARTNERSHIP (If additional space is required please attach additional sheets)	Partner	
	Partner	
	Partner	
	Partner	
	Partner	
PROPRIETORSHIP	Proprietor	

Effective 1-1-2012, the Citizenship Affidavit Form GID-276-EN must be submitted with this application for processing, select on this LINK.

http://www.oci.ga.gov/ExternalResources/Forms/AllForms/GID-276-EN%20JAN2012_Citizen%20Affidavit%20Form.pdf**ATTESTATION**

Under penalties of perjury, the below named, affirms that all the foregoing information submitted, including any accompanying documentation, was completed in good faith, is true, complete and correct to the best of my knowledge.

(Name of Attestator)	(Position Or Title of Attestator)	(Date)
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